	II		uired Eler ms noted:	ments Present :		FSCW-14
Work First Services Monitoring Guide						
Families or NCPs that Meet 200% Income Limit						
County						
This review guide is for cases with families at or below 200% of poverty or r submitted a Work First Plan amendment reflecting that they will provide ser					sure that the county	has
Instructions: Each question must be answered. "NA" may be used with additional information regarding eligibility as necessary (use c	comments	sectio		option. This fo	orm may be anno	otated
Month Being Reviewed and Services Received in that Month:						
County Case #SIS ID #						
Is the original DSS-5027 signed and keyed into SIS? ☐ Yes ☐ No Is the Eligibility period sta						
Non-financial Eligibility (Check the type of case being reviewed.)						
☐ Family with income at or below 200% of poverty				Method of Ver	rification	
Was each child living with a parent, specified relative, or legal custodian or guardian in service month?	□ Yes	□ No		☐ Statement Date	□ Collateral	
2. Is each child age 17 or younger or 18 attending high school and expected to graduate by age 19? [Section 109]	□ Yes	□ No		☐ Statement ☐ Other	☐ Birth Certificate	:S
Which child is over age 17?						
3. Is <u>each</u> family unit member a US citizen ? [Section 111]	☐ Yes	□ No		☐ Statement☐ Other	☐ Birth Certificate	s
For children or adults who are not citizens, are they qualified aliens?	□ Yes	□ No	□ N/A	□ INS Papers	□ Other	
Which included individuals are not citizens or qualified aliens?						

□ Non-	Custodia	l Parent o	f Work Fi	rst Child								
 4. Is the parent a non-custodial parent of a child who was a Work First recipient in the service month? 					□ Yes	□ No		☐ EIS Individual screen ☐ Other verification				
5. Is the non-custodial parent a US citizen? [Section 111]					[□ Yes	□ No		☐ Statement ☐ Birth Certificates ☐ Other			
> If	not, is the	non-custo	odial pare	nt a qualifi	ied alien?		[☐ Yes ☐ No ☐ N/A			Gross Income: \$	
<u>Financi</u>	al Eligibi	<u>lity</u>										
		or non-cu me? [Sec		arent have	any earn	ed or	[□ Yes □ No			☐ Statement ☐ Tax Return ☐ Wage Stub ☐ Other	
7. Is the	total gro	ss incom	e at or be	low 200%	of pover	'ty ? ¹	[□ Yes	□ No	□ N/A	Gross Income \$	
Family size	1	2	3	4	5	6	7		8			
200%	\$1633	\$2200	\$2767	\$3333	\$3900	\$4467	\$503	33	\$5600	For each additional family member, add \$567.00. 2006		
150%	\$1225	\$1650	\$2075	\$2500	\$2925	\$3350	\$377	75	\$4200	For each additional family member, add \$414.00. 2006		
200%	\$1,595	\$2,139	\$2,682	\$3,225	\$3,769	\$4,312	\$4,85	55	\$5399	For each additional family member, add \$544.00. 2005		
150%	\$1,197	\$1,604	\$2,012	\$2,419	\$2,827	\$3,234	\$3,64	12	\$4,049	For each additional family member, add \$408.00. 2005		
			<u>If</u>	County h	nas set lir	nit lower	than 2	00%,	docume	nt. See n	ote 1.	
<u>Service</u>												
8. Was	the servic	e(s) prov	ided allov	vable und	ler TANF?		1	□ Yes	□ No	□ N/A		
	_											
Number	of month	s this ser	vice cove	ers:								

¹ Remember that counties can set an income limit less than 200% of poverty. If the county has opted to do that, review their county plan to ensure that their choice has been documented. If an appropriate plan amendment has not been submitted with the lower income amount, yet the county is using the lower income limit, document this in the findings.

Conclusion

 Was the family or non-custodial parent eligible fo If no, why? 		
 Was the service allowable? ☐ Yes ☐ No If no, why? 		
Comments and Corrective Action Needed:		
☐ All Required Elements were present. ☐ Problems noted:		
County Reviewer	Date	
Monitor	Date	